

CLAIM OF: **WILLIAM B. MCCRARY**  
**1198 Lanier Boulevard, NE.**  
**Atlanta, Georgia 30306**

For property damages alleged to have been sustained as a result of a sewer back-up on June 22, 1999 at 1198 Lanier Boulevard, NE.

**BY PUBLIC SAFETY AND LEGAL ADMINISTRATION  
COMMITTEE:**

**BE IT RESOLVED** by the Council of the City of Atlanta that the action of the Department of Law be approved in authorizing payment to **WILLIAM B. MCCRARY** the sum of **\$982.01** in full settlement and satisfaction of all claims, past, present and future, of every kind and character for damages alleged to have been sustained as a result of a sewer back-up on June 22, 1999 at 1198 Lanier Boulevard, NE. as is more particularly set forth in the within claim; said sum taken from and charged to account 2J01/529017/T31001, Settlement of Suits and Claims, Department of Law.

APPROVED: SUSAN PEASE LANGFORD  
CITY ATTORNEY

BY:   
ROSALIND RUBENS NEWELL  
DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 00L0173

Date: October 19, 2000

Claimant /Victim WILLIAM B. MCCRARY

BY: (Atty) (Ins. Co.) \_\_\_\_\_

Address: 1198 Lanier Boulevard, NE., Atlanta, Georgia 30306

Subrogation: \_\_\_\_\_ Claim for Property damage \$ 982.01 Bodily Injury \$ \_\_\_\_\_

Date of Notice: 7/19/99 Method: Written, Proper X Improper \_\_\_\_\_

Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X

Date of Occurrence 2/25/98 and 6/22/99 Place: 1198 Lanier Boulevard, NE.

Department PUBLIC WORKS Division Sewer Operations

Employee involved \_\_\_\_\_ Disciplinary Action: \_\_\_\_\_

NATURE OF CLAIM: Claimant sustained property damage when sewage backed up into the basement of his home. An investigation determined that the sewage back-up was caused by a blockage in the City's mainline. The City had prior knowledge of this condition and failed to adequately correct it.

**INVESTIGATION:**

Statements: City employee \_\_\_\_\_ Claimant X Others \_\_\_\_\_ Written X Oral \_\_\_\_\_

Pictures \_\_\_\_\_ Diagrams \_\_\_\_\_ Reports: Police \_\_\_\_\_ Dept Report X Other \_\_\_\_\_

Traffic citations issued: City Driver \_\_\_\_\_ Claimant Driver \_\_\_\_\_

Citation disposition: City Driver \_\_\_\_\_ Claimant Driver \_\_\_\_\_

**BASIS OF RECOMMENDATION:**

Function: Governmental X Ministerial \_\_\_\_\_

Improper Notice \_\_\_\_\_ More than Six Months \_\_\_\_\_ Other \_\_\_\_\_ Damages reasonable X

City not involved \_\_\_\_\_ Offer rejected \_\_\_\_\_ Compromise settlement \_\_\_\_\_

Repair/replacement by Ins. Co. \_\_\_\_\_ Repair/replacement by City Forces \_\_\_\_\_

Claimant Negligent \_\_\_\_\_ City Negligent X Joint \_\_\_\_\_ Claim Abandoned \_\_\_\_\_

Respectfully submitted,



INVESTIGATOR - ALEXIS HOLMES

**RECOMMENDATION:**

Pay \$ 982.01 Adverse \_\_\_\_\_ Account charged: 1A01 \_\_\_\_\_ 2J01 X 2H01 \_\_\_\_\_

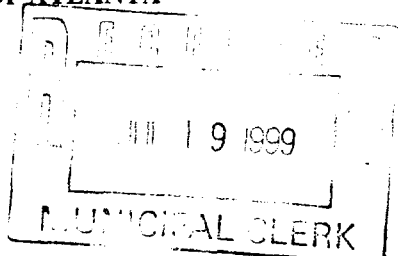
Claims Manager:  Concur/date 10-19-00

Committee Action: \_\_\_\_\_ Council Action \_\_\_\_\_

COUNCIL OF THE CITY OF ATLANTA  
MUNICIPAL CLERK  
City Hall  
55 Trinity Avenue, S.W.  
Atlanta, Georgia 30335

RE: CLAIM FOR DAMAGES

*Jordan*  
08/04/99



Today's Date: June 22, 19

ENTERED - 8-9-99 - SB  
99L0489 - DOBBS JORDAN

Dear Municipal Clerk:

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ 982.01 property and /  
\$ \_\_\_\_\_ bodily injury for which I contend the City is liable.

1. Date of incident: 6/22/99 2. Time of Incident: 7:45am 3. Police called: \_\_\_\_\_  
(month/day/year) Yes No

4. Location of incident (including street address): 1198 Lanier Blvd NE Atlanta 30

5. Name of your insurance company: Liberty Mutual Policy No. H32-258-139378-7

6. State what and how incident occurred: The city sewage line became obstructed  
in the line at the street. This caused city raw  
sewage to back up into my basement to a level  
of approx. one foot deep.

7. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILL  
RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!

8. The registered owner must make the claim for vehicle damages, complete the following and attach two (2) estimates of  
repair and proof of ownership of your vehicle (copy of the current tag receipt or title).

Your vehicle: \_\_\_\_\_  
(Make) (Year) (Tag Number) (Driver's Name)

City vehicle: \_\_\_\_\_  
(Make) (City Driver's Name) (Department/Bureau)

9. Witness: Calvin Gray, supervisor City of Atlanta Sewage Dept. (404) 624-0752  
(Name) (Address) (Telephone Number)

10. The acknowledgement of this claim in no way waives the sovereign immunity of the City of Atlanta, as granted by  
State law, nor is it an admission of liability on behalf of the City of Atlanta and / or its employee(s).

11. This claim should be mailed immediately to the address shown above.

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE  
INFORMATION IS TRUE AND CORRECT.

William B. McCrary  
Signature of Claimant

William B. McCrary  
(Print Claimant's Name)

1198 Lanier Blvd. NE  
(Address)

Atlanta, GA 30306  
(City, State and Zip Code)

(404) 676-5901 (404) 892-357  
(Work Number) (Home Number)